

County: Crawford
 PRAIRIE HEALTH CARE CENTER
 1505 EAST BRUNSON STREET

Facility ID: 7320

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PRAIRIE DU CHIEN 53821 Phone: (608) 326-8471
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 91
 Total Licensed Bed Capacity (12/31/01): 98
 Number of Residents on 12/31/01: 76

Ownership:
 Highest Level License: Non-Profit Corporation
 Operate in Conjunction with CBRF? Skilled
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 78

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		31.6
Supp. Home Care-Personal Care	No					1 - 4 Years		38.2
Supp. Home Care-Household Services	No	Developmental Disabilities	2.6	Under 65	6.6	More Than 4 Years		30.3
Day Services	No	Mental Illness (Org./Psy)	38.2	65 - 74	6.6			-----
Respite Care	No	Mental Illness (Other)	2.6	75 - 84	28.9			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	44.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	13.2	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.3		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	2.6		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	34.2	65 & Over	93.4	-----		
Transportation	No	Cerebrovascular	5.3		-----	RNs		6.9
Referral Service	No	Diabetes	0.0	Sex	%	LPNs		15.7
Other Services	No	Respiratory	2.6		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	10.5	Male	23.7	Aides, & Orderlies		42.7
Mentally Ill	No		-----	Female	76.3			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi cal d (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	4	100.0	212	48	80.0	95	0	0.0	0	8	66.7	128	0	0.0	0	0	0.0	0	60	78.9
Intermediate	---	---	---	11	18.3	79	0	0.0	0	4	33.3	116	0	0.0	0	0	0.0	0	15	19.7
Limited Care	---	---	---	1	1.7	69	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.3
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		60	100.0		0	0.0		12	100.0		0	0.0		0	0.0		76	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	23.3	Daily Living (ADL)	Independent			
Private Home/With Home Health	10.0	Bathing	0.0	61.8	38.2	76
Other Nursing Homes	5.0	Dressing	3.9	73.7	22.4	76
Acute Care Hospitals	61.7	Transferring	35.5	46.1	18.4	76
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	28.9	36.8	34.2	76
Rehabilitation Hospitals	0.0	Eating	51.3	32.9	15.8	76
Other Locations	0.0	*****				
Total Number of Admissions	60	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	5.3	Receiving Respiratory Care		2.6
Private Home/No Home Health	24.6	Occ/Freq. Incontinent of Bladder	51.3	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	13.8	Occ/Freq. Incontinent of Bowel	32.9	Receiving Suctioning		1.3
Other Nursing Homes	4.6			Receiving Ostomy Care		1.3
Acute Care Hospitals	7.7	Mobility		Receiving Tube Feeding		1.3
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	13.2	Receiving Mechanically Altered Diets		38.2
Rehabilitation Hospitals	0.0					
Other Locations	1.5	Skin Care		Other Resident Characteristics		
Deaths	47.7	With Pressure Sores	7.9	Have Advance Directives		98.7
Total Number of Discharges (Including Deaths)	65	With Rashes	5.3	Medications		
				Receiving Psychoactive Drugs		50.0

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer Group Ratio %	Bed Size: 50-99 Peer Group Ratio %	Licensure: Skilled Peer Group Ratio %	All Facilities %
Occupancy Rate: Average Daily Census/Licensed Beds	78.9	88.9 0.89	85.1 0.93	84.4 0.93	84.6 0.93
Current Residents from In-County	81.6	78.4 1.04	72.2 1.13	75.4 1.08	77.0 1.06
Admissions from In-County, Still Residing	35.0	25.3 1.38	20.8 1.68	22.1 1.58	20.8 1.68
Admissions/Average Daily Census	76.9	108.1 0.71	111.7 0.69	118.1 0.65	128.9 0.60
Discharges/Average Daily Census	83.3	107.3 0.78	112.2 0.74	118.3 0.70	130.0 0.64
Discharges To Private Residence/Average Daily Census	32.1	37.6 0.85	42.8 0.75	46.1 0.70	52.8 0.61
Residents Receiving Skilled Care	78.9	90.9 0.87	91.3 0.86	91.6 0.86	85.3 0.93
Residents Aged 65 and Older	93.4	96.2 0.97	93.6 1.00	94.2 0.99	87.5 1.07
Title 19 (Medicaid) Funded Residents	78.9	67.9 1.16	67.0 1.18	69.7 1.13	68.7 1.15
Private Pay Funded Residents	15.8	26.2 0.60	23.5 0.67	21.2 0.75	22.0 0.72
Developmentally Disabled Residents	2.6	0.5 5.21	0.9 2.92	0.8 3.34	7.6 0.35
Mentally Ill Residents	40.8	39.0 1.05	41.0 0.99	39.5 1.03	33.8 1.21
General Medical Service Residents	10.5	16.5 0.64	16.1 0.65	16.2 0.65	19.4 0.54
Impaired ADL (Mean)	51.3	49.9 1.03	48.7 1.05	48.5 1.06	49.3 1.04
Psychological Problems	50.0	48.3 1.03	50.2 1.00	50.0 1.00	51.9 0.96
Nursing Care Required (Mean)	7.2	7.0 1.03	7.3 1.00	7.0 1.03	7.3 0.99